

110TH CONGRESS  
1ST SESSION

# S. 1069

To amend the Public Health Service Act regarding early detection, diagnosis,  
and treatment of hearing loss.

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IN THE SENATE OF THE UNITED STATES

MARCH 29, 2007

Ms. SNOWE (for herself and Mr. HARKIN) introduced the following bill; which  
was read twice and referred to the Committee on Health, Education,  
Labor, and Pensions

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## A BILL

To amend the Public Health Service Act regarding early  
detection, diagnosis, and treatment of hearing loss.

1 *Be it enacted by the Senate and House of Representa-*  
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Early Hearing Detec-  
5 tion and Intervention Act of 2007”.

6 **SEC. 2. EARLY DETECTION, DIAGNOSIS, AND TREATMENT**  
7 **OF HEARING LOSS.**

8 Section 399M of the Public Health Service Act (42  
9 U.S.C. 280g–1) is amended—

1 (1) in the section heading, by striking “**IN-**  
 2 **FANTS**” and inserting “**NEWBORNS AND IN-**  
 3 **FANTS**”;

4 (2) in subsection (a)—

5 (A) in the matter preceding paragraph (1),  
 6 by striking “newborn and infant hearing screen-  
 7 ing, evaluation and intervention programs and  
 8 systems” and inserting “newborn and infant  
 9 hearing screening, evaluation, diagnosis, and  
 10 intervention programs and systems, and to as-  
 11 sist in the recruitment, retention, education,  
 12 and training of qualified personnel and health  
 13 care providers,”; and

14 (B) by amending paragraph (1) to read as  
 15 follows:

16 “(1) To develop and monitor the efficacy of  
 17 statewide programs and systems for hearing screen-  
 18 ing of newborns and infants; prompt evaluation and  
 19 diagnosis of children referred from screening pro-  
 20 grams; and appropriate educational, audiological,  
 21 and medical interventions for children identified with  
 22 hearing loss. Early intervention includes referral to  
 23 and delivery of information and services by schools  
 24 and agencies, including community, consumer, and  
 25 parent-based agencies and organizations and other

1 programs mandated by part C of the Individuals  
 2 with Disabilities Education Act, which offer pro-  
 3 grams specifically designed to meet the unique lan-  
 4 guage and communication needs of deaf and hard of  
 5 hearing newborns and infants. Programs and sys-  
 6 tems under this paragraph shall establish and foster  
 7 family-to-family support mechanisms that are crit-  
 8 ical in the first months after a child is identified  
 9 with hearing loss.”; and

10 (C) by adding at the end the following:

11 “(3) To develop efficient models to ensure that  
 12 newborns and infants who are identified with a hear-  
 13 ing loss through screening are not lost to follow-up  
 14 by a qualified health care provider. These models  
 15 shall be evaluated for their effectiveness, and State  
 16 agencies shall be encouraged to adopt models that  
 17 effectively reduce loss to follow-up.

18 “(4) To ensure an adequate supply of qualified  
 19 personnel to meet the screening, evaluation, and  
 20 early intervention needs of children.”;

21 (3) in subsection (b)—

22 (A) in paragraph (1)(A), by striking  
 23 “hearing loss screening, evaluation, and inter-  
 24 vention programs” and inserting “hearing loss

1 screening, evaluation, diagnosis, and interven-  
2 tion programs”;

3 (B) in paragraph (2)—

4 (i) by striking “for purposes of this  
5 section, continue” and insert the following:

6 “for purposes of this section—

7 “(A) continue”;

8 (ii) by striking the period at the end  
9 and inserting “; and”; and

10 (iii) by adding at the end the fol-  
11 lowing:

12 “(B) establish a postdoctoral fellowship  
13 program to foster research and development in  
14 the area of early hearing detection and inter-  
15 vention.”;

16 (4) in paragraphs (2) and (3) of subsection (c),  
17 by striking the term “newborn and infant hearing  
18 screening, evaluation and intervention programs”  
19 each place such term appears and inserting “new-  
20 born and infant hearing screening, evaluation, diag-  
21 nosis, and intervention programs”; and

22 (5) in subsection (e)—

23 (A) in paragraph (3), by striking “ensur-  
24 ing that families of the child” and all that fol-  
25 lows and inserting “ensuring that families of

1 the child are provided comprehensive, con-  
2 sumer-oriented information about the full range  
3 of family support, training, information serv-  
4 ices, and language and communication options  
5 and are given the opportunity to consider and  
6 obtain the full range of early intervention serv-  
7 ices, educational and program placements, and  
8 other options for their child from highly quali-  
9 fied providers.”; and

10 (B) in paragraph (6), by striking “, after  
11 rescreening,”; and  
12 (6) in subsection (f)—

13 (A) in paragraph (1), by striking “fiscal  
14 year 2002” and inserting “fiscal years 2008  
15 through 2013”;

16 (B) in paragraph (2), by striking “fiscal  
17 year 2002” and inserting “fiscal years 2008  
18 through 2013”; and

19 (C) in paragraph (3), by striking “fiscal  
20 year 2002” and inserting “fiscal years 2008  
21 through 2013”.

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